

# Proposed Mediation Model Through Systematic Literature Review on Organizational Culture in Healthcare Institutions

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## ABSTRACT

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This literature review aims to meticulously identify and analyze pivotal research on the intricate relationships between organizational culture, quality of work life, and job satisfaction. The review encompasses two decades of scholarly work, spanning from 2001 to 2023, as published in prestigious SCOPUS-listed journals. The selection of research papers adhered to systematic literature review methods and adhered to the PRISMA 2021 guidelines, ensuring a methodologically sound and comprehensive approach. Notably, the review has highlighted a research gap through the utilization of the Thematic Content and Concept Mapping (TCCM) tool, which suggests the need for a study on primary and secondary healthcare organizational culture, quality of work life, and job satisfaction of nursing professionals in India, with the objective of proposing a conceptual mediation model.

**Keywords :** Organizational Culture, Healthcare Management, Job Satisfaction, Quality of work life, Hospital Human Resource Management.

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## INTRODUCTION

Organizational Culture has provided consequential foundation for understanding the workings of the organizations throughout diverse industries (Ginevičius & Vaitkūnaitė, 2006; Marcoulides & Heck, 1993; Godwyn & Gittell 2012.) Organizational Culture is the irrefutable consolidation of the business management with sociology, anthropology and cognitive psychology for better understanding of the working of organization and people (Ouchi, W. G. & Wilkins A. L. 1985; Allaire, Y. & Firsirotu, M. E. 1984; Sun, S. 2008).

Due to the multifaceted construct of the hospitals, its interprofessional teams work and the heterogeneity of the medial service delivery, research on the organizational cultures existing in the healthcare setting is essential (Seago, 1997). In

the past three decades' various research on organizational cultures in preventive and curative healthcare settings has been conducted across various socio demographic profiles. The authors observed the role of organizational culture in hospitals and its involvement with effective implementation of the health policies, standard operating procedures, inter professional knowledge workers, scientifically advanced technologies/treatments and management practices (Fottler et al 1989; Arndt, M. & Bigelow, B. 2000). The period of COVID - 19 has added on to the emergency of developing and enhancing the domain of organizational culture in healthcare organizations due to the dramatic shift of role of hospitals and knowledge workers. It can be identified through the analysis of the literature by comparing the results from pre COVID period and recent studies (Tisdell, C.A.

2020; Mattila, E. et al. 2020, Catania, G. et al. 2020).

Identifying this requirement of studying Organizational Culture especially after COVID - 19 phase this review plays a significant role in building a groundwork through analysis of SCOPUS journals' published research articles from the period of 2001 till 2021. This literature review is structured around identification, analysis and conclusion through nomological network to result into a constructive research agenda. This literature review will be a foundation for future research studies on hospitals' organizational culture, job satisfaction and quality of work life in healthcare workers. Which shall strengthen knowledge cognition of the researchers, identify research shortfalls and pave way for concrete theoretical solutions through methodology, constructs, theory and contexts.

### Review Design

The strength of systematic literature review re-enforces the research through identification and

systematic literature review on databases covering three basic steps of planning, execution and reporting. (Sharma et al 2020; Crossan & Apaydin 2010; Tranfield, D. et al. 2003).

The five steps of the systematic literature review are evident from the table 1 below. Step one and two includes the identification of the research domain and key words by analysing previous literature reviews on healthcare workforce and hospital organizational culture, forming the embryonic stage of the research objectives. In step three and four strict segregation of literature review was conducted based on inclusion and exclusion criteria set as per the objectives of the literature review mentioned in table 1. (Kitchen 2004; Tranfield et al. 2003).

Inclusion of articles from various search strings with more than 100 citations, published only in journals from SCOPUS, full length research articles with strong objective and structured research methodology. The databases namely Google Scholar, PubMed, JSTOR were searched through keywords: Organizational Culture, job

**Table 1: Steps in SLR**

Step 1	Keywords Search Strings	Generating literature 14,000 and above
Step 2	Applying inclusion and exclusion criteria	SCOPUS and ABDC journal published full length research articles with 100 and above citations
Step 3	Selection through titles and abstracts scrutiny	Including research on hospitals and healthcare settings only.
Step 4	Analysing SLR and framing TCCM	Identifying the theory, contexts, constructs and methodologies in each paper
Step 5	Suggestion	Proposing conceptual scheme for future research

analysis of research papers for research topics, research gaps and theoretical frameworks (Paul and Criado 2020;). This literature review is based on TCCM framework tool developed by Paul & Rosado-Serrano 2019 and Gilal et al 2019. The TCCM tool is applied on the filtered research articles filtered through the seven steps of the

satisfaction, quality of work life and hospital administration. Exclusion of weak articles was done by examining the research methodology, objectives and constructs, citation score. The final step generates the group of selected research paper which suffices the object of our literature review projected under table 2.

**Table: 2 Selected Literature from SLR**

S.No.	Reference	Journal
1	Aarons and Sawitzky 2006	Administration and Policy in Mental Health and Mental Health Services Research
2	Acar & Acar 2014	Emerging market of Journals
3	Alharbi et al 2012	Health Policy
4	An et al 2011	Journal of Transcultural Nursing
5	Bellou 2010	Career Development International
6	Berlowitz et al 2003	Health Services Research
7	Braithwaite et al 2010	BMJ Quality and Safety
8	Brazil et al 2010	Health Care Management Review
9	Davies et al 2007	Medical Care Research and Review
10	Gregory et al 2009	Journal of Business Research
11	Groene et al 2010	BMC Health Services Research
12	Hagbaghery et al 2004	Human Resource for Health
13	Hartmann et al 2009	Medical Care Research and Review
14	Jacobs and Roodt 2008	Health SA Gesondheid
15	Jacobs et al 2013	Social Science & Medicine
16	Körner et al 2015	BMC Health Services Research
17	LaGuardia and Oelke 2021	International Journal of Nursing Sciences
18	Linzer et al 2009	Annals of Internal Medicine
19	Melnyk et al 2010	Nursing Outlook
20	Melnyk et al 2017	Worldviews on Evidence-Based Nursing
21	Mills et al 2008	Journal of the American College of Surgeons
22	Montgomery et al 2013	British Journal of Health Psychology
23	Park & Kim 2009	Leadership in Health Services
24	Rad, A. M. M. 2006	The TQM Magazine
25	Reiman and Oedewald 2007	Safety Science
26	Renedo et al 2015	Public Management Review
27	Shirey, M. R. 2009	Critical Care Nursing Quarterly
28	Singer et al 2009	Health Care Management Review
29	Speroff et al 2010	BMJ Quality and Safety
30	Stock et al 2007	International Journal of Production Economics
31	Tzeng, Ketefian& Redman 2002	International Journal of Nursing Studies
32	Wakefield et al 2001	American Journal of Medical Quality
33	White et al 2003	Journal of Marketing
34	Williams et al 2007	Health Care Management Review
35	Zazzali et al 2007	Health Service Research

## Theoretical Underpinnings

The citation analysis of the selected literature exhibits the genesis of organizational culture in healthcare domain as coalescence of sociology, anthropology, psychology and culture. The theoretical abutment observed from the literature review identifies major contributors from the scholarship of quality improvement, performance management, cognitive approach and appraisal. The theoretical and conceptual

models proposed in the researches interpret the measurement of organizational culture in health care setting on a triangular approach of improvement in employee's performance, patient care and organizational accreditation as performance is not only measured in terms of financial profitability but by standardization through policies, certifications and licenses. E.g., entrepreneurial type of organizational culture was more inclined towards continuous improvement through accreditation, licencing and policy implementations.

**Table 3: Theoretical underpinnings and Standardized measurement tools**

S.No.	Reference	Theoretical Underpinnings	Standardized Measurement Scale
1	Acar & Acar 2014	Competing Value Framework	Organizational Culture Assessment Instrument
2	Jacobs et al 2013	Competing Value Framework	Competing Value Framework Questionnaire
3	An et al 2011	Competing Value Framework	Organizational Culture Scale by Sun 1986 Quality of Work Life Scale by Walton 1975 Organizational Effectiveness Scale by Weiss 1967 Minnesota Satisfaction Questionnaire
4	Rad. 2006	Total Quality Management	Self-constructed survey questionnaire
5	Hartmann et al 2009	High Reliability Organization Theory	Patient Safety Climate in Health Care Organizations Survey Zammuto and Krakower Instrument
6	Stock et al 2007	Total Quality Management Normal Accident Theory High Reliability Organization Theory Competing Value Framework	Organizational Culture Assessment Instrument; Self-constructed questionnaire for CSF
7	Singer et al 2009	Organizational Psychology theory Competing Value Framework	Patient Safety Climate in Health Care Organizations Survey Zammuto and Krakower Instrument
8	Park & Kim 2009	Competing Value Framework	Competing Value Framework by Shortell et al 1995 Job satisfaction & Turnover intention by Thomas and Tymon's (1994)
9	Gregory et al 2009	Competing Value Framework	Self-constructed survey

10	Körner et al 2015	Input-Process-Output Model	Hospital Culture Questionnaire derived from Corporate Culture Short form by Jöns Questionnaire on Staff Satisfaction in Medical Rehabilitation Internal Participation Scale
11	Wakefield et al 2001	Continuous Quality Improvement	Culture Inventory by Kimberly and Quinn Quality Improvement Implementation Scale Medication Administration Error Reporting Survey Focus Group
12	Montgomery et al 2013	Job – Demand Resource Theory Job – Demand Control Theory	
13	Alharbi et al 2012	Competing Value Framework Person Centred Care Model	Organizational Values Questionnaire Uncertainty Cardiovascular Population Scale
14	Shirey, M. R. 2009	Critical Decision Model	In-depth Interview derived from critical decision model.
15	White et al 2003	Cognitive Appraisal Theory Jung’s Theory of Psychological Type Prospect Theory Resource Dependency Theory Decision Theory	Case Scenario Approach Survey
16	Zazzali et al 2007	Competing Value Framework	Self-constructed questionnaire
17	Melnyk et al 2010	Evidence Based Practices; Advancing Research and Clinical Practice through close Collaboration Model	The Evidence Based Practice Belief Scale Organizational Culture and Readiness for System Wide Integration of Evidence based Practice Scale The Evidence Based Practice Implementation Scale Price and Mueller Job Satisfaction questionnaire Self-constructed Questionnaire
18	Williams et al 2007	Equity Theory Social Exchange Theory Total Quality Management	
19	Brazil et al 2010	Competing Value Framework	Primary Care Organizational Questionnaire Organizational Culture Questionnaire by Shortell

20	Speroff et al 2010	Competing Value Framework	The Competing Values Organisational Culture Assessment Instrument The Safety Attitudes Questionnaire The Safety Climate Survey Information and Analysis
21	Jacobs and Roodt 2008	Theory of Planned Behaviour	The Organisational Commitment Questionnaire by Roodt Van Dyne and LePine “helping” scale Organisational Culture Survey
22	Reiman and Oedewald 2007	Theory of Sociotechnical Systems Rational Instrumental theory	Contextual Assessment of Organizational Culture
23	Berlowitz et al 2003	Institutional Theory Quality Improvement	Self -constructed survey Zammuto and Krakower Instrument
24	Tzeng, Ketefian& Redman 2002	Proposed Conceptual Map	Nurse Assessment Survey (NAS) scale by Braskamp and Maehr. Nurse Assessment Survey (NAS) scale by Braskamp and Maehr. Nursing Services Inpatient Satisfaction Survey (NSISS).
25	Mills et al 2008	Quality Improvement	Medical Team Training derived from Team Training Questionnaire
26	Davies et al 2007	Competing Value Framework	Competing Value Framework Instrument
27	Hagbaghery et al 2004	Proposed Conceptual Map	Grounded Theory Research
28	Linzer et al 2009	Proposed Conceptual Map for Minimizing Error Maximizing Output	Self-constructed survey
29	Aarons and Sawitzky 2006	Organizational Culture by Glisson	Children’s Services Survey by Glisson Self-constructed scale derived from OCI
30	Bellou 2010	Organizational culture By Schein	Organizational Culture Profile by O’Reilly Job Description Index
31	Braithwaite et al 2010	Evaluation and Quality Improvement Program Cycle. Government of Australia	ACHS Clinical Indicators Survey

32	Melnyk et al 2017	Advancing Research and Clinical Practice through close Collaboration Model	Evidence Based Practices Belief Scale by Melnyk & Fineout-Overholt The Organizational Culture and Readiness Scale for System-Wide Integration of Evidence-Based Practice. Observational data from patients' records.
33	LaGuardia and Oelke 2021	Neoliberal Ideology Oppression Theory	Decision Paper
34	Renedo et al 2015	Patient Public Involvement and Organizational Culture by Zittoun	In-depth Open-Ended Interviews Observation of activities
35	Groene et al 2010	Methods of Assessing Response and Quality Improvement Strategies	Methods of Assessing Response and Quality Improvement Strategies and ENQUAL Instruments

The majority of the research papers revolved around Competing Value Framework, Total Quality Management, Theory of Soci-Technical Systems. Whereas it was also noted that through conceptual models the researchers had provided a lucid practical method to apply organizational culture theories practically in healthcare systems to affect job satisfaction and quality of work life in hospitals. Such models are Advancing Research and Clinical Practice through close Collaboration Model, Evaluation and Quality Improvement Program Cycle and Methods of Assessing Response to Quality Improvement Strategies. The assessment of the measurement tools provides us the information on the diversity of the statistical evidence on sub variables like safety, job satisfaction, quality of life, evidence-based practices and organizational change/climate.

### Industries and Countries

Table 4 offers a compelling portrayal of the prevalence of research articles in specialized tertiary level hospitals. Notably, it highlights that the dynamics of organizational culture and the job satisfaction of healthcare employees assume even greater significance within higher-level

healthcare service providers when compared to simpler ambulatory and rehabilitation institutions. This observation underscores the critical role that organizational culture and employee job satisfaction play in the context of advanced healthcare services. The spectrum of relevant literature extends from curative hospitals to university-affiliated and medical educational hospitals, indicating the breadth of healthcare settings where this area of study is pertinent.

The United States of America emerges prominently within the literature, featuring as a focal point for research in this field. This concentration suggests the nation's robust academic and healthcare infrastructure, which is fertile ground for the examination of organizational culture and job satisfaction among healthcare employees. Furthermore, it is noteworthy that a solitary research endeavour encompasses a multinational perspective, spanning across various countries and healthcare professions. This international perspective highlights the global relevance and applicability of the subject matter, emphasizing the universality of healthcare organizational culture

and its impact on job satisfaction.

The majority of research studies within this domain adopt an empirical approach, employing statistical analyses as a fundamental methodology. This empirical emphasis underscores the significance of data-driven research in understanding the nuances of

organizational culture and its influence on job satisfaction among healthcare professionals. It also reflects the commitment to evidence-based practices and the quest for concrete solutions to improve the healthcare work environment, ultimately enhancing the quality of care for patients.

**Table 4: Industry and Countries**

Reference	Healthcare systems	Country
Acar & Acar 2014	Tertiary hospitals	Turkey
Jacobs et al 2013	Acute Care Hospitals	United Kingdom
An et al 2011	University Hospitals	Korea
Rad, A. M. M. 2006	University Hospitals	Iran
Hartmann et al 2009	Acute Care Hospitals	United States of America
Stock et al 2007	Tertiary Hospitals	United States of America
Singer et al 2009	Tertiary Hospitals	United States of America
Park & Kim 2009	Tertiary Hospitals	Korea
Gregory et al 2009	Tertiary Hospitals	United States of America
Körner et al 2015	Medical Rehabilitation Healthcare Settings	Germany
Wakefield et al 2001	Tertiary and Acute Care Hospitals	United States of America
Montgomery et al 2013	Healthcare Professionals	Greece, Portugal, Bulgaria, Romania, Ireland, Turkey, Croatia, Republic of Macedonia
Alharbi et al 2012	Tertiary Hospitals	Sweden
Shirey, M. R. 2009	Acute Hospitals	United States of America
White et al 2003	Tertiary Hospitals	United States of America
Zazzali et al 2007	Physician Groups	United States of America
Melnyk et al 2010	Community Hospitals	United States of America
Williams et al 2007	Ambulatory Clinics	United States of America
Brazil et al 2010	Primary Care Paediatric health settings	United States of America
Speroff et al 2010	Tertiary Hospitals	United States of America
Jacobs and Roodt 2008	Tertiary Hospitals	South Africa



Reiman and Oedewald 2007	Tertiary Hospitals	Desk Research
Berlowitz et al 2003	Nursing Homes	Sweden
Tzeng, Ketefian& Redman 2002	Tertiary Hospital	United States of America
Mills et al 2008	Army Tertiary Hospital	United States of America
Davies et al 2007	Tertiary Hospitals	United Kingdom
Hagbaghery et al 2004	Tertiary Hospitals	Iran
Linzer et al 2009	Primary Hospitals	United States of America
Aarons and Sawitzky 2006	Curative Mental Healthcare	United States of America
Bellou 2010	Tertiary Hospitals	Greece
Braithwaite et al 2010	Primary, Secondary and Tertiary Hospitals	Australia
Melnyk et al 2017	Acute Hospitals	United States of America
LaGuardia and Oelke 2021	Healthcare Systems	Global
Renedo et al 2015	Healthcare Systems	United Kingdom
Groene et al 2010	Tertiary Hospitals	Europe

**Determinants used in the selected literature:**

An identification of constructs or determinates from the literature review shows multivariate approach of understanding the organizational culture. The most common constructs (variables) in the research articles are job satisfaction,

performance, leadership, safety management, quality of life, evidence-based practices and quality management. The construct (variables) provides an insight that the variables associated with organizational culture range from employee performance to patient satisfaction. The employee performance and service delivery are considered as indicators of organizational culture and quality of work life on the employees.

**Table 5: Constructs or Determinants in the research article**

Reference	Constructs
Acar & Acar 2014	Organizational Culture Types, Performance
Jacobs et al 2013	Organizational Culture Types, Performance
An et al 2011	Organizational Culture Types, Organizational Effectiveness, Quality of Work Life
Rad, A. M. M. 2006	Organizational Culture values, Total Quality Management
Hartmann et al 2009	Organizational Culture Types, Organizational Climate
Stock et al 2007	CSF, Organizational Culture types, Error Reduction

<b>Singer et al 2009</b>	Organizational Culture Types, Safety Climate.
<b>Park &amp; Kim 2009</b>	Organizational Culture, Job Satisfaction , Turnover Intention
<b>Gregory et al 2009</b>	Organizational Culture Types, Organizational Effectiveness, Attitudes, Values, Organizational Outcomes.
<b>Körner et al 2015</b>	Organizational Culture, Interprofessional Teamwork, Job Satisfaction , Leadership, Strategy and Structure
<b>Wakefield et al 2001</b>	Organizational Culture, Continuous Quality Improvement, Medication Administration Error (MEA)
<b>Montgomery et al 2013</b>	Institutional Contexts, Organizational Management, Job Characteristics, Health Professionals, Treatment Decisions and Choices, Quality of Life.
<b>Alharbi et al 2012</b>	Open System, Human Relation, Internal Process, Rational Goals
<b>Shirey, M. R. 2009</b>	Authentic Leadership, Organizational Culture, Healthy Work Environment
<b>White et al 2003</b>	Organizational Culture, Cognitive Style, Information Use
<b>Zazzali et al 2007</b>	Organizational Culture Types, Satisfaction , Managerial Decision Making, Practice Competitiveness, Human Resource,
<b>Melnyk et al 2010</b>	Evidence Based Practices Beliefs, Evidence Based Practices Implementation, Job Satisfaction , Group Cohesion,
<b>Williams et al 2007</b>	Organizational Culture, Quality Emphasis, Leadership Alignment, Information Emphasis, Trust, Cohesion, Job Stress, Job Satisfaction , Burnout, Error Likelihood, Suboptimal Patient Care.
<b>Brazil et al 2010</b>	Organizational Culture, Job Satisfaction , Perceived Effectiveness
<b>Speroff et al 2010</b>	Organizational Culture, Teamwork, Quality Improvement
<b>Jacobs and Roodt 2008</b>	Organizational Culture , Knowledge Sharing, Organisational Commitment, Organizational Citizenship Behaviour and Job Satisfaction
<b>Reiman and Oedewald 2007</b>	Safety Management, Organizational Culture, Organizational Core Task
<b>Berlowitz et al 2003</b>	Organizational Culture, Quality Improvement
<b>Tzeng, Ketefian&amp; Redman 2002</b>	Organizational Culture, Job Satisfaction , Patient Satisfaction
<b>Mills et al 2008</b>	Organizational Culture, Communication, Team work, Human Factor Awareness
<b>Davies et al 2007</b>	Organizational Culture, Performance, Team Culture.
<b>Hagbaghery et al 2004</b>	Organizational Culture, Structure, Support
<b>Linzer et al 2009</b>	Practice Structure, Organizational Culture, Work Flow, work control, Leadership Policies and Procedures, Patient Job Satisfaction , Stress, Burnout, Intent to Leave, Satisfaction, Trust, Quality of Life, Quality of Care, Medical Errors.

<b>Aarons and Sawitzky 2006</b>	Organizational Culture, Organizational Climate, Work Attitude, Turnover,
<b>Bellou 2010</b>	Organizational Culture, Job Satisfaction, Gender, Age
<b>Braithwaite et al 2010</b>	Organizational Culture, Organizational Climate, Consumer Involvement, Leadership and Clinical Performance.
<b>Melnyk et al 2017</b>	Organizational Culture, Evidence-Based Practice beliefs and Implementation, Patient Outcomes,
<b>LaGuardia and Oelke 2021</b>	Organizational Culture, Incivility and Bullying, Institution, Employees, Patients.
<b>Renedo et al 2015</b>	Organizational Culture, Patient Participation, Employees.
<b>Groene et al 2010</b>	Organizational Culture, External Pressure, Hospital Governance, Quality Improvement System, Patient Empowerment, Professional Involvement.

### Future Research Agenda and Proposed Conceptual Model

The objective of this literature review is to provide a roadmap for future researchers in the domain of organizational culture in healthcare settings. The analysis is derived through TCCM framework i.e., Theory, context, and methodology/measurements (Paul and Rosado-Serrano, 2019; Paul, J., & Dhiman, R. (2021).

### Recommended Theories for Future Research

The selected literature review provides with a notion that competing values framework is the most postulated theoretical foundation to perceive and measure the organizational culture in health care settings followed by total quality management. The diversity of departments in a healthcare setting, the various knowledge workers and interaction of them through inter professional teams brings to surface the need for understanding the patterns, notions, trends in culture by specifically studying the specialized departments in the hospital.

For the future researchers it can be understood that the study of organizational culture, job satisfaction and quality of work life in healthcare

can be conducted on three different parameters. First, to identify which type of organizational culture is existing in the organization. For this literature with Competing Value Framework can be considered. Secondly, the research on performance of the employees, job satisfaction through improvement in quality of service delivered. For this category of study, the research conducted under total quality improvement can be considered.

Lastly, for research into understanding the quality of work life through interaction of policies, employee, patients and organization's culture can be done by using socio technical theory. We can also see this in the different models in the selected literature review that a holistic study of healthcare organization requires socio-technical systems approach.

### Recommended Contexts for Future Research

The vast domain of health care includes the institutions with curative, palliative, preventive, rehabilitative services. Different types of institutes provide different set of medical services to the population. The selected literature view identified most of the research on the field of curative institutes of tertiary and acute care

settings e.g., university and specialization hospitals. It was also seen that the researches are considered under single institute and geographical region. Therefore, we encourage the researchers to probe into the health care settings providing palliative, preventive and rehabilitative service. Along with considering longitudinal studies in more than one country. As India and African countries are also places of potential research due to their complex and dynamic healthcare sectors.

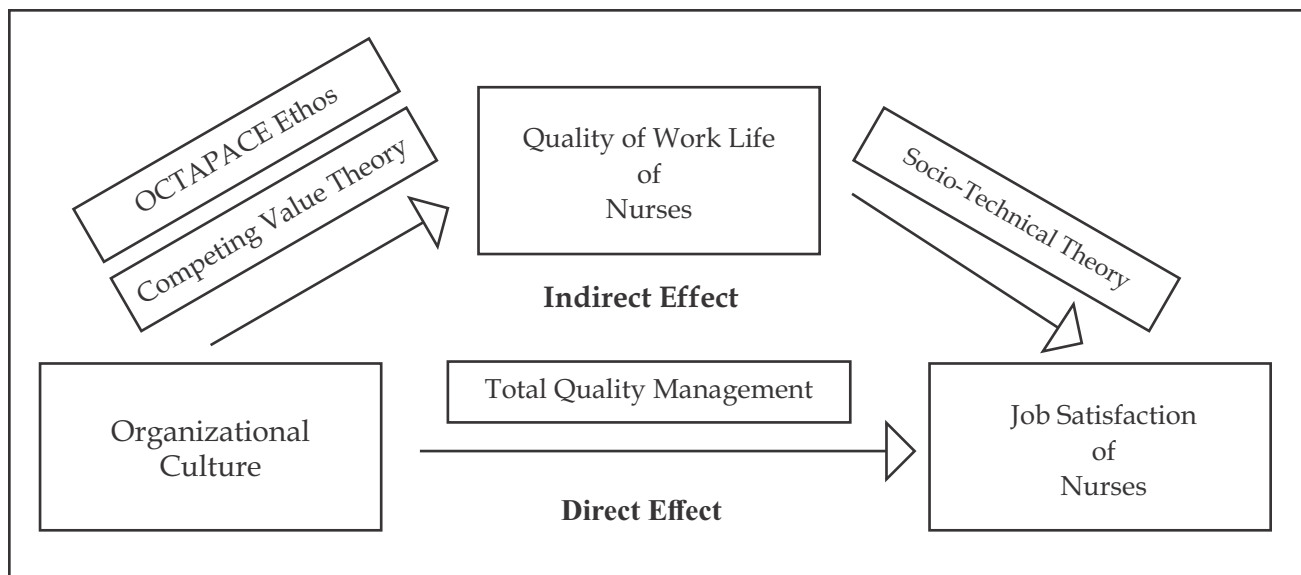
### Recommended Constructs for Future Research

The literature review showed multiple non repetitive constructs (variables) in the selected literature review. It is advised to select the constructs in accordance with the theory you are considering to study like organizational culture which is amalgamation of different schools of thoughts branching from management studies, sociology, anthropology and psychology. It is advised to select the constructs on the basis of the

school of thought one wants to use for studying organizational culture. This open advice is also seen in the work of Ouchi and Wilkins 1985 by dividing the organizational culture literature under three aspects to understand its working. (1) holistic studies, (2) semiotic or language studies and (3) quantitative studies. Hence, authors advance the proposition to consider job satisfaction and quality of work life to be analysed with organizational culture in health care settings.

### Recommended Methodologies for Future Research

The selected literature review shows nearly all the studies conducted empirically through statistical analysis of standardized tools and surveys. The use of qualitative research methodologies namely phenomenology, grounded theory, ethnography and narrative inquiry are need of the hour. The recommendation is found to be similar to Al-Busaidi 2008.



## Implications Derived from Systematic Literature Review

The systematic literature review infers theoretical and practical implications. These implications are either confirmatory or rejecting the previous norms or patterns observed in the past literature. The suggestions are mentioned below.

### Theoretical Implications

The incorporation of evidence-based practices holds substantial promise in fortifying healthcare organizational culture typology, improving the quality of work life for employees, and enhancing their job satisfaction. Evidence-based practices theory, rooted in the systematic integration of the best available evidence, clinical expertise, and patient values, plays a pivotal role in healthcare. Beyond its direct clinical applications, this theory extends its influence towards quality improvement initiatives, elevating employee performance, and evaluating healthcare policies. The introduction of evidence-based practices into the study of organizational culture offers a comprehensive understanding of how data-driven decision-making influences the work environment, augments employee well-being, and fosters job satisfaction within healthcare organizations.

Complementing the implementation of evidence-based practices, the integration of the Competing Values Theory and Socio-Technical Systems Theory enriches the exploration of organizational culture within the healthcare context. The Competing Values Theory offers a versatile framework for comprehending and evaluating different organizational cultures, such as clan, adhocracy, hierarchy, and market orientations. This framework facilitates a nuanced exploration of how these diverse cultures impact the quality of work life and job satisfaction among healthcare staff. Concurrently, the Socio-Technical Systems Theory underscores the intricate interaction between individuals and technology within an

organization. By amalgamating these theories with evidence-based practices, we cultivate a more holistic and comprehensive approach to scrutinizing organizational culture and its intricate association with the quality of work life and job satisfaction among healthcare employees.

The amalgamation of these theories not only deepens our understanding but also augments our capacity to develop holistic solutions that encompass the betterment of healthcare organizations, employees, and, ultimately, the well-being of patients. This synthesis underscores the complex interplay between organizational culture, evidence-based practices, and the socio-technical environment. A thorough examination of this multifaceted relationship has the potential to effect transformative improvements in healthcare settings. By dissecting and comprehending these intricacies, healthcare leaders, policymakers, and researchers can work towards creating a more supportive, efficient, and satisfying work environment for healthcare staff. This, in turn, contributes to enhanced patient care and the overall elevation of healthcare quality.

### Practical Implications

The filtered literature indicates towards the dire need of healthcare organizational study in India and Africa. The health care system in India and Africa being from the developing nations with increasing population with elevated purchasing parity, resource constrictions but technological advancement in healthcare, high performing technical teams/professionals and diverse soci demographic profile of the sub-continent and continent. The study of the two shall yield quantifiable solutions to ground level problems of organizational functionality and human resource management. Secondly, research in the primary and secondary level of healthcare institutes is necessary as these are the initial point of contact for curative interventions for the sick. The population reaching at the

tertiary level of hospitals are exhausted and undergone multiple interactions of culture in the health system. Hence, study of primary and secondary level of hospitals shall provide clear solutions on the question that how organisational culture effects employees, patients and delivery of quality service.

## Limitations

The authors would like to acknowledge that while this systematic review in the subject field provides valuable insights, it cannot be claimed to be entirely comprehensive due to its temporal scope, which is limited to articles published between 2001 and 2023. The constraints of this timeframe mean that certain factors and methodological aspects may not have been fully explored, and the study's conclusions may not encompass the entirety of the topic matter.

It is important to recognize that the landscape of healthcare organizational culture is dynamic and constantly evolving, with new developments and research emerging beyond the scope of this review. While the study provides a comprehensive overview of the literature within the designated time frame, it is essential to acknowledge that ongoing research will continue to shape our understanding of this complex field.

The primary intent of this systematic review is to serve as a foundational reference point for future academics and researchers interested in the field of healthcare organizational culture. By synthesizing existing knowledge and highlighting key themes and findings, it provides a valuable resource for those looking to embark on further research in this area. The hope is that this review will not only offer insights into the current state of knowledge but also stimulate and guide the development of new research endeavours, facilitating the expansion of our understanding of healthcare organizational culture. It is envisioned that the study's findings will inspire future scholars to delve deeper into this subject, explore

emerging trends, and address unanswered questions, ultimately contributing to the ongoing advancement of knowledge in this critical area of healthcare management and research.

## Conclusion

The systematic literature review highlights a compelling imperative for future research, particularly in the domains of organizational culture, job satisfaction, and quality of work life, with a specific focus on hospital management. The healthcare landscape is characterized by its intricate and multifaceted nature, demanding a more profound understanding and enhancement of these key aspects. This understanding encompasses the allocation of services across diverse service organizations, infrastructure management, the dynamics of interprofessional teams, policy formulation and execution, accreditation attainment, and adherence to standardizations. These elements collectively shape the character and effectiveness of healthcare organizations while profoundly influencing the experiences of both healthcare staff and patients.

The tangible expressions of healthcare culture are manifest in various facets of daily healthcare operations. These include the establishment and implementation of proven methods for quality improvement, the adoption of robust patient safety measures, the management of risks inherent in healthcare delivery, and the use of approved methodologies for addressing staff concerns and processing patient feedback or complaints. These elements are pivotal for the continual enhancement of healthcare quality and the maintenance of a safe, supportive, and efficient working environment.

As the healthcare landscape continues to evolve and confront new challenges, there is an increasing need for comprehensive research to probe deeper into this field of study. The objective is to offer invaluable insights and innovative

solutions to critical issues encountered by healthcare organizations. Rigorous research, both qualitative and quantitative, has the potential to advance the existing literature and, most importantly, to drive tangible improvements in healthcare practices and outcomes.

In this context, we emphasize the significance of qualitative research in primary and secondary healthcare organizational studies, with a particular focus on regions like India and Africa. These regions present unique healthcare environments characterized by distinctive challenges, cultural contexts, and resource constraints. Qualitative research, with its ability to explore and understand the nuanced dynamics of healthcare organizational culture, job satisfaction, and quality of work life, is indispensable for addressing the specific needs and challenges of healthcare systems in these areas.

In summary, our systematic literature review underscores the urgency for further research in the pivotal domains of organizational culture, job satisfaction, and quality of work life within the context of hospital management. Healthcare culture is a complex and multifaceted entity influenced by a myriad of factors, and a more profound understanding and improvement of these aspects are central to elevating healthcare outcomes and experiences. We assert the importance of rigorous qualitative research, particularly in regions like India and Africa, as a potent driver for progress, fostering positive change in healthcare practices, and enhancing the well-being of individuals in these communities.

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